

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO. 10826044	FILING DATE
							APPLICANT(S)	
CLAIMS								
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			
	IND	DEP	IND	DEP	IND	DEP	IND	DEP
1							31	
2							32	
3							33	
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49								
50								
TOTAL IND. 2							TOTAL IND. 2	
TOTAL DEP. 6							TOTAL DEP. 11	
TOTAL CLAIMS 8							TOTAL CLAIMS 13	

BEST AVAILABLE COPY